

RESPIRATORY

Respiratory Assessment

Respiratory Assessment

- Listen - To Pt. Breathe or Talk
 - Noisy Breathing is Obstructed Breathing
 - Not All Obstructed Breathing is Noisy
 - Snoring - Tongue Blocking Airway
 - Stridor - “Tight” Upper Airway from Partial Obstruction

Respiratory Assessment

- Decreased LOC
- Head Trauma
- Maxillofacial Trauma
- Neck Trauma
- Chest Trauma

Respiratory Assessment

- Is the Pt. Moving Air?
- Is the Pt. Moving Air Adequately?
- Is the Pt's Blood Being Oxygenated?

Respiratory Assessment

- Look for Symmetry of Chest Expansion
- Look for Signs of Increased Respiratory Effort
- Look for Changes in Skin Color
- Listen for Air Movement at Mouth & Nose
- Listen for Air Movement in Peripheral Lung Fields
- Feel for Air Movement at Mouth & Nose
- Feel for Symmetry of Chest Expansion

Respiratory Assessment

- Nasal Flaring
- Tracheal Tugging
- Retractions
- Accessory Muscle Use
- Use of Abdominal Muscles on Exhalation

Respiratory Assessment

- Decreased LOC
- Possible Shock
- Possible Severe Hemorrhage
- Chest Pain
- Chest Trauma
- Respiratory distress or dyspnea
- HX of any Kind of Hypoxia

Respiratory Assessment

- <10
 - >24
 - Insufficient Inspiratory O₂ (Tidal Volume Inadequate)
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- Open Pneumothorax
 - Flail Chest
 - Tension Pneumothorax

Respiratory Assessment

- IF YOU CAN'T TELL WHETHER A PT. IS MOVING AIR ADEQUATELY, HE ISN'T!
- THE NEED TO INTUBATE IS NOT THE SAME AS THE NEED TO VENTILATE!

Respiratory Assessment

- Is the heart beating?
- Is there major external hemorrhage?
- Is the Pt. Perfusing?
- Effects of hypoxia:
 - Early in adults - Tachycardia
 - Late in adults - Bradycardia
 - Children - Bradycardia

Respiratory Assessment

- Don't let respiratory failure distract you from assessing for circulatory failure.
- Vascular Access

Respiratory Assessment

- Restlessness, anxiety, combativeness = HYPOXIA
- Drowsiness, lethargy = HYPERCARBIA

Respiratory Assessment

- Dyspnea

- Subjective sensation that breathing is excessive, difficult, or uncomfortable

Respiratory Assessment

- How long has dyspnea been present?
- Gradual or sudden onset?
- What aggravates or alleviates?
- Coughing?
- Productive cough?
- What does sputum look/smell like?
- Pain?
- What does the pain feel like?

Respiratory Assessment

– Respiratory Pattern

- Kussmaul
- Cheyne-Stokes
- Central Neurogenic Hyperventilation

Respiratory Assessment

– Neck

- Trachea Midline?
- Jugular Vein Distention?
- Sub-cutaneous Emphysema?
- Accessory Muscle Use/Hypertrophy?

Respiratory Assessment

– Chest

- Barrel Chest?
- Deformity/Discoloration/Symmetry?
- Flail Segment/Paradoxical Movement?
- Breath Sounds?
- Adventitious Sounds?

Respiratory Assessment

– Chest

- Third Heart Sounds? (S3)
- Tenderness/Instability?
- Sub-cutaneous Emphysema?
- Fremitus?
- Symmetrical Expansion?
- Dullness/Hyperresonance to Percussion?

Respiratory Assessment

– Extremities

- Pre-tibial/Pedal Edema
- Nailbed Color
- “Clubbing” of digits

Adventitious Sounds

- Upper Airway
- Partial obstruction of the upper airway by the tongue
- High pitched crowing sound
- Usually heard on inspiration
- Indication of a tight upper airway

Adventitious Sounds

- Whistling sound
- Usually heard on expiration
- Indication of narrowing of lower airways caused by:
 - Bronchospasm
 - Edema
 - Foreign material

Adventitious Sounds

- Rattling sound
- Caused by mucus in larger airways

- Fine crackling sound
- Indication of fluid in the alveoli

Adventitious Sounds

- Forced exhalation against partially closed glottis
- Reflex response to mucosa irritation
- Determine circumstances
 - At work
 - Postural changes
 - Lying down
- Productive vs non-productive

Adventitious Sounds

- Forced exhalation via nasal route
 - Clears nasal passages
 - Reflex response to mucosa irritation
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- Slow, deep inspiration - Prolonged, audible exhalation
 - Reexpands areas of atelectasis

Adventitious Sounds

- Hiccups, singultus
- Spasm of diaphragm followed by glottic closure
- No useful purpose
- Benign, transient

Adventitious Sounds

- Breath-holding
- Rebreathing from paper bag
- Valsalva maneuver

Adventitious Sounds

- Brain stem lesions
- Increased intracranial pressure
- Renal failure
- Pancreatitis
- Hepatitis
- Liver cancer
- Pneumonia

Chief Complaint

- Excessive
- Difficult
- Uncomfortable

History of Present Illness

- Productive?
- Sputum color?
- What kind?

Past History

- ? CHF with pulmonary edema
- ? COPD
- ? Asthma

Past History

- ? Pulmonary embolism

Medications

- Bronkodyl
- Bronkolyser
- Brokotabs
- Elixophyllin
- Theo-Dur
- Theofort

Medications

- Lasix
- Diuril
- Hydrodiuril
- Digitalis